

BALLOT DESIGNATION WORKSHEET

This worksheet is intended to assist in the prompt evaluation of requested ballot designations.

Name of Candidate: JOHN PAUL TABAKIAN
Candidate for the Office of: Member of the City Council, Torrance, California
(Including district or division number, if applicable)

Home Address: 2654 West 225th Street
(Number and street address)
Torrance, CA 90505
(City, State and Zip Code)

Business Address: 2654 West 225th Street
(Number and street address)
Torrance, CA 90505
(City, State and Zip Code)

Mailing Address: PO Box 11069
(If different from above)
Torrance, CA 90510
(City, State and Zip Code)

Daytime Telephone Number: 310-421-8532
(area code)

Evening Telephone Number: 310-316-3469
(area code)

Fax Telephone Number: 310-742-5152
(area code)

E-mail: CLASS@TABAKIAN

Name of Attorney or Other Person Authorized to Act in
Your Behalf: _____

His/Her Fax Number: _____
(area code)

Telephone Number: _____
(area code)

E-mail Address: _____

RECEIVED

FEB 28 2014

PROPOSED BALLOT DESIGNATION: Professor / Business Owner City of Torrance
City Clerk's Office
(Note: Designation must be your principal profession, vocation or occupation and may be no more than three words, however, you may use the full title of the elective office you currently hold.)

(optional)

If above not accepted, 1st alternative: _____
2nd alternative: _____

Describe what you do and why you believe you are entitled to use the requested ballot designation. If using the title of an elective office, you may submit a copy of your certificate of election or appointment.

The term "incumbent" must be used as a noun. It shall not be used in conjunction with any other words, including any accompanying adjectives or modifiers, and must stand alone.

Provide academic consulting services and career pathway workshops.
Professor of political science for Los Angeles Trade Technical College

Your Job Title: Academic Consultant / Professor

Dates You Held the Position: Professor: 9/1/2004
consultant: 10/1/2012

Name of Your Employer or Business: Tabakian, Inc.

LA Trade Tech College

Contact Person(s) Who Can Verify this Information:

Name(s): Alicia Rodriguez: 213-763-5513

Dr. Tabakian 310-316-3469 / Julian M. Lujan

Telephone Number(s): 323-972-8623
(area code)

To the best of my knowledge and belief, the above-requested ballot designation(s) represent my true principal profession(s), vocation(s) and/or occupation(s) which I am entitled to use as my ballot designations pursuant to §13107 and 13107.5 of the Elections Code.

Signed and dated this 28th day of February 2014, in Torrance, California.
(location)

Signature

You may attach whatever supporting documentation or exhibits you wish that you believe support your proposed ballot designation. These documents will not be returned to you, so do not submit original versions.